PAGE 1 / 12

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For Other Than A	n Authorized Committee	Office Use Only
NAME OF COMMITTEE (in fu	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Follow the North	Star Fund		
ADDRESS (number and a ▼ Check if different than previously reported. (ACC)	#125	et NE	MN 55413 -
2. FEC IDENTIFICAT	ΠΟΝ NUMBER ▼	CITY ▲	STATE ▲ ZIP CODE ▲
C C00431874		3. IS THIS REPORT NEW (N) OR	AMENDED (A)
4. TYPE OF REPO (Choose One) (a) Quarterly Repo April 15 Quarterly Reports 15	Report Due On:	Feb 20 (M2)	Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Oct 20 (M10) Jan 31 (YE) General (12G) Runoff (12R)
October 15 Quarterly I January 3	Report (Q2) Report fo Report (Q3)	etion	Special (12S) In the State of
July 31 Mi Report (No Year Only) Termination (TER)	d-Year on-election (MY) (d) 30-Day POST-Ele	r the:	Runoff (30R) Special (30S)
5. Covering Period	04 01 Y	Election on 2018 through 04	State of
I certify that I have exa Type or Print Name of	Halbach, Gerald, , ,	best of my knowledge and belief it is tr	ue, correct and complete.
Signature of Treasurer	Halbach, Gerald, , ,	[Electronically Filed]	Date 05 / 20 / 2018
NOTE: Submission of fals	se, erroneous, or incomplete inf	formation may subject the person signing	this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Follow the North Star Fund 04 01 2018 04 30 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 69264.69 January 1, 2018 (b) Cash on Hand at 82608.15 Beginning of Reporting Period..... 10000.00 112000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 181264.69 92608.15 6(a) and 6(c) for Column B)..... 35637.22 124293.76 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 56970.93 56970.93 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

Page 3 FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Follo	ow t	he	North	Star	Fund
				Olai	ı ana

Report Covering the Period: From: 04	01 / 2018 To	: 04 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	5000.00	64500.00
(ii) Unitemized(iii) TOTAL (add	0.00	0.00
Lines 11(a)(i) and (ii)	5000.00	64500.00
(b) Political Party Committees	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines	5000.00	47500.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other	10000.00	112000.00
Party Committees	0.00	0.00
. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
(Carry Totals to Line 37, page 5)	0.00	0.00
Political Committees	0.00	0.00
(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	10000.00	112000.00
. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	10000.00	112000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	1000.1010100	Jaional Tear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	15637.22	39293.76
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))	15637.22	39293.76
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	20000.00	85000.00
. Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))		
(use Schedule F)	0.00	0.00
. Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
. Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
 Federal Election Activity (52 U.S.C. § 30101(20) (a) Allocated Federal Election Activity (from Schedule H6))))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Dishamananta (cdd Line 24() 22	7 7	7 7
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	35637.22	124293.76
. Total Federal Disbursements	7 7 7	
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	35637.22	404000 70
,	30031.22	124293.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) III. Net Contributions/

Operating Expenditures

(from Line 11(d), page 3)

(from Line 28(d)).....

(subtract Line 34 from Line 33)

(add Line 21(a)(i) and Line 21(b))▶

(from Line 15, page 3).....

(subtract Line 37 from Line 36)

33. Total Contributions (other than loans)

35. Net Contributions (other than loans)

36. Total Federal Operating Expenditures

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

34. Total Contribution Refunds

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 10000.00 112000.00 0.00 0.00 10000.00 112000.00 15637.22 39293.76 0.00 0.00 15637.22 39293.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		6	OF	12	
(c	(check only one)									
	X 11a 11b					11c		12	:	
		13		14		15		16	;	17

	the name and address of any political committee						
NAME OF COMMITTEE (In Full) Follow the North Star Fund							
Full Name of Individual (Last, First, Middle Dayton, Julia, W., , Mailing Address 1719 W Franklin Ave City Minneapolis FEC ID number of contributing federal political committee. Name of Employer (for Individual) N/A Receipt For: Primary General Other (specify)	State Zip Code MN 55405-3107 C Occupation (for Individual) Retired Aggregate Year-to-Date 5000.00	Date of Receipt O4 11 2018 Transaction ID: C22774911 Amount of Each Receipt this Period 5000.00 Memo Item					
Full Name of Individual (Last, First, Middle Mailing Address		Date of Receipt					
City	State Zip Code	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	Occupation (for Individual)	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	_					
Full Name of Individual (Last, First, Middle Mailing Address	e Initial) or Full Organization Name	Date of Receipt					
City	State Zip Code	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.							
Name of Employer (for Individual) Receipt For:	Occupation (for Individual)	Memo Item					
Primary General Other (specify)	Aggregate Year-to-Date ▼						
SUBTOTAL of Receipts This Page (optional	l)	5000.00					
TOTAL This Period (last page this line num	ber only)	5000.00					

S 17

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 OF 12					
	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)					
"	EWIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12					
_				13 14 15 16 17					
	ny information copied from such Reports and St for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full)								
	Follow the North Star Fund								
<u></u>	Full Name of Individual (Last, First, Middle Initi	ial) or Full C	Organization Name						
A.	Delta Pac Multi-Canidate Committee			Date of Receipt					
	Mailing Address 1212 New York Ave NW			M M / D D / Y Y Y Y Y					
	Ste 200	State	Zip Code	04 17 2018 Transaction ID : C22778107					
	Washington	DC	20005-6609	Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	C co	0104802	5000.00					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General		5000.00						
	Other (specify) ▼		3000.00						
_	Full Name of Individual (Last, First, Middle Initi	ial) or Full C	Prganization Name						
В.				Date of Receipt					
	Mailing Address			M = M / D = D / Y = Y = Y					
	City	State	Zip Code						
		Oldio	2.10 0000	Amount of Each Receipt this Period					
	FEC ID number of contributing	C							
	federal political committee.	U .		45 45 45 46					
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
	Receipt For:		.						
	Primary General	Aggregate	Year-to-Date ▼						
	Other (specify) ▼	L	A A A						
_									
C.	Full Name of Individual (Last, First, Middle Initial	ial) or Full C	rganization Name	Date of Receipt					
Ο.	Mailing Address			M M / D D / Y Y Y Y					
	City	State	Zip Code						
				Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C							
				Пи					
	Name of Employer (for Individual)	Осс	upation (for Individual)	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General								
	Other (specify)		4 4 4						
Γ.	SURTOTAL of Receipts This Page (ontional)			5000.00					

TOTAL This Period (last page this line number only).....

5000.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		R LINE NUMBER: PAGE 8 OF 12 eck only one)				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	22 23 26 27 28b 28c 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full) Follow the North Star Fund							
Full Name (Last, First, Middle Initial)			Data of District				
Campaign Compliance Solutions Mailing Address 370 Selby Ave			Date of Disbursement 04 02 2018				
Ste 215			04 02 2010				
City Saint Paul	State Zip Code MN 55102		FEC Identification Number				
Purpose of Disbursement Compliance Consulting			C Transaction ID : D679828				
Candidate Name		Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse Senate President	ement For: Primary		500.00				
State: District:			Memo Item				
Full Name (Last, First, Middle Initial) - Campaign Compliance Solutions			Date of Disbursement				
Mailing Address 370 Selby Ave Ste 215			04 30 2018				
City Saint Paul Purpose of Disbursement	State Zip Code MN 55102		FEC Identification Number				
Compliance Consulting Candidate Name	Category/ Type	Transaction ID : D679830 Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ement For: Primary General	Туре	500.00				
State: District:	Other (specify)		Memo Item				
Full Name (Last, First, Middle Initial) - Campaign Finance Consultants			Date of Disbursement				
Mailing Address 10 G St NE Ste 570			04 10 2018				
City Washington	State Zip Code DC 20002-4268		FEC Identification Number				
Purpose of Disbursement Fundraising Consulting			C Transaction ID : D679829				
Candidate Name	_	Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify) \		5086.55				
	- ···-· (-		Memo Item				

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SCHEDULE B (FEC Form 3X)			FOR L	INE N	UMBER:		PA	GE 9 OF	- 12	
ITEMIZED DISBURSEMENTS Use separate schedule(s) (check				(check only one)						
		Summary Page	×	21b 28a	22 28b	23 28c	26	27 30b		
Any information copied from such Reports and Statements may not be sold or used by									200	
or for commercial purposes, other than using the na										
NAME OF COMMITTEE (In Full)										
Follow the North Star Fund										
Full Name (Last, First, Middle Initial)					5.	5				
A. Campaign Finance Consultants					M = M	Disburse	D / Y	2040	7	
Mailing Address 10 G St NE Ste 570					04)1	2018		
City	State DC	Zip Code			FEC Ide	entificatio	n Number			
Washington Purpose of Disbursement	DC	20002-4268								
Fundraising Consulting					C					
Candidate Name			Category	v/			ID: D679	9827 ment this Pe	eriod	
			Type	y'	, anount	o. Laon	2,0001001		-	
	ement For:							5097.69		
Senate President	Primary Other (sp.	General								
State: District:	Other (sp	o ony) ▼			Me	mo Item				
Full Name (Last, First, Middle Initial)										
B. Merchant Services					Date of	Disburse	ement			
					M = M		D / Y	YYY		
Mailing Address 7300 Chapman Highway					04)2	2018		
City Knoxville	State	Zip Code 37920			FEC Id	entificatio	n Number			
Purpose of Disbursement		07 020		_	С					
Credit Card Processing Fees						nsaction	ID : D679	825		
Candidate Name			Category	y/				ment this Pe	eriod	
Office Sought: House Disburse	ement For:		Туре					152.98		
Senate Disputs	Primary	General				-	7	102.00	-	
President		Other (specify)				M B				
State: District:					I IVIE	mo Item				
Full Name (Last, First, Middle Initial)					D-+-	Diet				
C. New Partners Consulting					Date of	Disburse		YYYY		
Mailing Address 1250 I St NW					04		2	2018		
Ste 200 City	State	Zip Code								
Washington	DC	20005-5994			FEC Id	entificatio	n Number			
Purpose of Disbursement	1			7	С					
Fundraising Consulting						nsaction	ID : D679	9831		
Candidate Name			Category Type	y/	Amount	of Each	Disburser	ment this Pe	eriod	
Office Sought: House Disburse	ement For:		1,906					4000.00		
Senate	Primary	General				7	7	45		
President	Other (sp	ecify) ▼			Me	mo Item				
State: District:					<u> </u>					
QUIDTOTAL -(D)								9250.67	7	
SUBTOTAL of Disbursements This Page (optional)				<u> </u>	<u> </u>	7	- 7	9230.07	4	
TOTAL This Period (last page this line number only	v)									

S 17

See separate schedule(s) Greeck only one) Greeck on	SCHEDULE B (FEC Form 3X)						NE NUMBER: PAGE 10 OF 12				
Detailed Surmary Page	ITEMIZED DISPLIPSEMENTS Use separate schedule(s) (c			(check	(check only one)						
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Follow the North Star Fund Full Name (Last, First, Middle Initial) A. NGP VAN Mailing Address 1101 15th St NW Site 500 City Washington Purpose of Disbursement Database Candidate Name Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City State: Disbursement For: State: Disbursement Other (specify) State Zip Code Primary General Other (specify) FEC Identification Number Collegory/ Type FEC Identification Number Colleg											
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Office Sought: House Senate President For: Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name District: Senate Primary General Other (specify) Memo Item Date of Disbursement Category' Type Amount of Each Disbursement this Period Office Sought: House District: Senate Primary General Disbursement City State Zip Code FEC Identification Number Category' Type Date of Disbursement this Period Memo Item FEC Identification Number Category' Type Office Sought: House Disbursement For: Category' Type Office Sought: House Disbursement For: Senate Purpose of Disbursement For: Senate Purpose of Disbursement For: Senate President Other (specify) State: District: Memo Item Substoral Amount of Each Disbursement This Page (optional)	Candidate Name			Category	//					eriod	
Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name										-	
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NAME OF COMMITTEE (In Full)		- ·						
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A. Democratic Party Of Virginia		Date of D	isburseme	nt				
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B. Minnesota Democratic-Farmer-La	bor Party	у		Date of D	isburseme			
Mailing Address 225 Plato Blvd E				04	10	2018		
City	State	Zip Code						
Saint Paul	MN	55107-1624		FEC Iden	tification N	umber		
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C. Montana Democratic Party					isburseme			
Mailing Address PO Box 802				04	30	2018		
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Helena	MT	59624-0802			tification N	ullingel		
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A. North Dakota Democratic-Npl Part	у			Date of Disbursement			
Mailing Address 1902 E Divide Ave				04 30 2018			
,	State Zip C			FEC Identification Number			
Bismarck Purpose of Disbursement	ND 585	01-2301					
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